

Alabama

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State CARE Act Program Profile

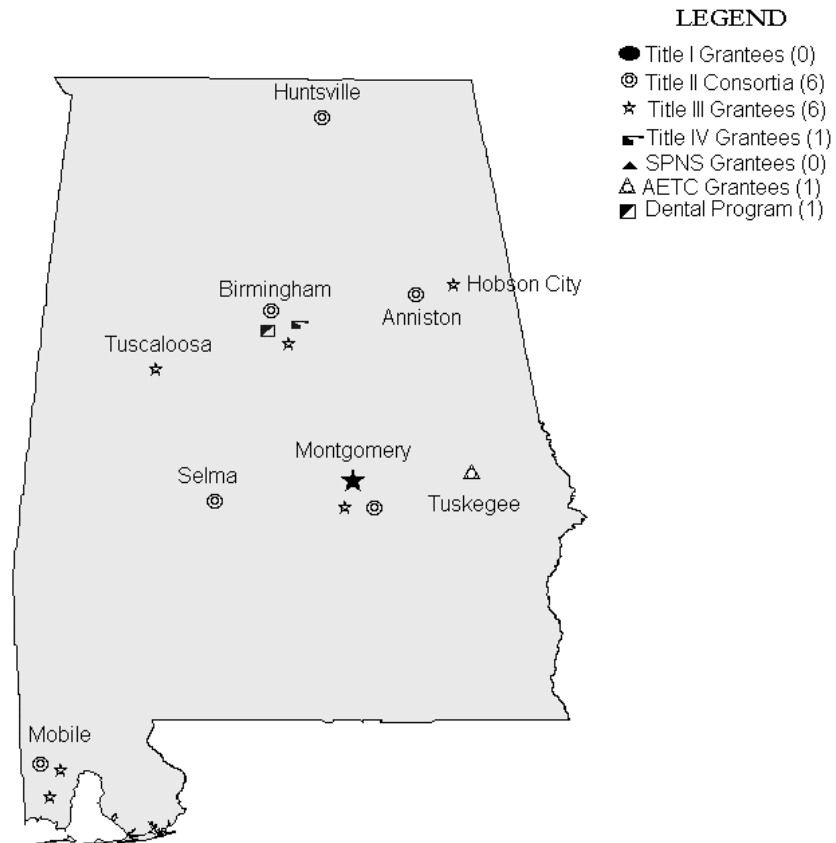
CARE Act Funding History Since 1996

Fiscal Year	1996	1997	1998	Total
Title I	\$0	\$0	\$0	\$0
Title II (including ADAP)	\$2,756,823	\$4,167,971	\$5,110,075	\$12,034,869
ADAP	(\$401,982)	(\$1,329,706)	(\$2,265,704)	(\$3,997,392)
Title III	\$1,702,794	\$1,875,854	\$2,036,979	\$5,615,627
Title IV	\$362,080	\$597,015	\$614,925	\$1,574,020
SPNS	\$37,850	\$34,400	\$0	\$72,250
AETC	\$5,550	\$30,750	\$25,750	\$62,050
Dental	\$14,442	\$27,101	\$23,769	\$65,312
Total	\$4,879,539	\$6,733,091	\$7,811,498	\$19,424,128

Number of CARE Act-funded Grantees in State (in addition to Title II and ADAP grants)

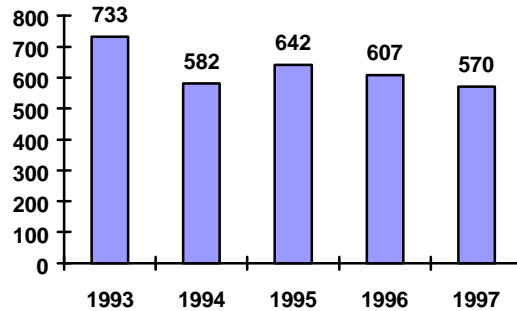
	1996	1997	1998
Title I	0	0	0
Title III	5	5	6
Title IV	1	1	1
SPNS	1	1	0
AETC (grantee or subcontractor)	1	1	1
Dental	1	1	1

Location of FY 1998 CARE Act Grantees and Title II Consortia



HIV/AIDS Epidemic in the State: Alabama (Pop. 4,319,154)

- ▶ Persons reported to be living with AIDS through 1997: 2,232
- ▶ New AIDS Cases by Calendar Year, 1993-1997
- ▶ Persons reported to be living with HIV infection (not AIDS) through 1997: 4,256
- ▶ State reporting requirement for HIV: Name-based reporting for HIV (initiated January 1988)
- ▶ State AIDS Cases (cumulative) since 1993: 3,134 (1% of AIDS cases in the U.S.)



Demographics of AIDS Cases Reported in 1997

	State-Specific Data	National Data
Men (13 years and up):	82%	78%
Women (13 years and up):	18%	22%

	State-Specific Data	National Data
<13 years old :	0%	1%
13-19 years old :	1%	1%
20+ years old :	99%	98%

	State-Specific Data	National Data
White:	27%	33%
African American:	72%	45%
Hispanic:	1%	21%
Asian/Pacific Islander:	0%	<1%
Native American/Alaskan Native:	0%	<1%

	State-Specific Data	National Data
Men who have sex with men (MSM):	41%	35%
Injecting drug user (IDU):	14%	24%
Men who have sex with men and inject drugs (MSM/IDU):	8%	4%
Heterosexual contact:	14%	13%
Other, unknown or not reported:	23%	24%

Co-morbidities

	State Cases per 100,000 Population	U.S. Cases per 100,000 Population
Chlamydia (1996)	195.3	194.5
Gonorrhea (1996)	309.6	124.0
Syphilis (1996)	12.4	4.3
TB (1997)	9.4	7.4

Statewide Coordinated Statement of Need (SCSN)

To enhance collaboration in HIV needs assessment and planning activities among CARE Act grantees and to maximize CARE Act resources statewide, Title II grantees were required to develop, in collaboration with other CARE Act grantees, an SCSN by March 1998. SCSNs must include: a discussion of existing needs assessments; epidemiologic data; discussion of emerging issues in HIV care in the state; critical gaps in HIV medical and support services; and broad goals to address major service gaps.

- ▶ **Gaps:** dental care; transportation; mental health services; substance abuse treatment; follow-up counseling/referral; clinical trials; nutritional services; nursing home/long-term care; lack of trained providers; and prevention education
- ▶ **Emerging Needs:** increased HIV infection in adolescents; and the need for care services due to early intervention efforts and new therapies

State Medicaid Information

In 1998, Medicaid is estimated to have covered 55% of U.S. adults with AIDS and 90% of pediatric AIDS cases. Applying these percentages to the number of AIDS cases in the U.S., at least 108,000 individuals with AIDS were covered by Medicaid in 1998.

Medicaid Income Eligibility Requirements

Eligibility Category	Income
Adult Aged/Blind/Disabled*	75% FPL
Pregnant Women	133% FPL

*Income eligibility for State's ADAP program is 250% FPL.

Medicaid Prescription Drug Benefits Limits

Co-payment:	Yes
Limit on Rx per month:	No
Refill limit:	Yes
Quantity Limit:	Yes

Waivers

1115

Section 1115 of the Social Security Act gives the Secretary of Health and Human Services broad authority to waive provisions in Title XIX, the Medicaid statute. Populations covered vary from waiver to waiver, as does the scope of coverage and the nature of the provider organization.

1115 waiver: No

1915(b)

Section 1915(b) of the Social Security Act authorizes the Secretary of Health and Human Services to waive compliance with certain portions of the Medicaid statute that prevent a state from mandating that Medicaid beneficiaries obtain their care from a single provider or health plans.

1915(b) waiver(s): Yes

Title II: Alabama

Title II funds are provided to States and Territories to improve the quality, availability and organization of health care and support services for PLWH. From FY 1991 to FY 1998, more than \$1.9 billion in funding was appropriated for Title II programs in the U.S.

Funding History

Fiscal Year	1996	1997	1998	Total
Title II Formula Grant	\$2,756,823	\$4,167,971	\$5,110,075	\$12,034,869
ADAP (included in Title II grant)	(\$401,982)	(\$1,329,706)	(\$2,265,704)	(\$3,997,392)
Minimum Required State Match	\$0	\$0	\$0	\$0

Allocation of Funds

	1998
Health Care (State Administered)	\$4,060,546/79%
Home and Community Care	(\$0)
Health Insurance Continuation	(\$0)
ADAP/Treatments	(\$3,930,556)
Direct Services	(\$129,990)
Case Management (State Administered)	\$35,000/1%
Consortia	\$809,206/16%
Health Care*	(\$240,742)
ADAP/Treatment	(\$106,000)
Case Management	(\$316,006)
Support Services**	(\$146,458)
Administration, Planning and Evaluation (Total State/Consortia)	\$205,324/4%

* includes: diagnostic testing, preventive care and screening, prescribing and managing medication therapy, continuing care and management of chronic conditions, and referral to specialty care.

** includes: counseling, direct emergency financial assistance, companion/buddy services, day and respite care, housing assistance, and food services.

Consortia Activities, FY 1997

States provide services directly or through subcontracts with Title II HIV care consortia. A consortium is an association of public and nonprofit health care and support service providers and community-based organizations that plans, develops and delivers services for people living with HIV disease.

Number of consortia in State: 7

Consortium Name	Location	Service Area	Title II Funding, FY 1997
East Alabama CARE Consortium	Anniston	Blount, DeKalb, Etowah, Cherokee, St. Clair, Shelby, Calhoun, Talladega, Cleburn, Clay, Randolph, Coosa, Tallapoosa, and Chambers Counties	\$124,100
Jefferson County Ryan White CARE	Birmingham	Jefferson County	\$132,600
Mobile County Area Health Care Consortium	Mobile	Mobile	\$80,750
Ryan White Consortium of North Alabama	Huntsville	Lauderdale, Colbert, Franklin, Marion, Winston, Limestone, Madison, Jackson, Morgan, Marshall, Cullman, and Lawrence Counties	\$113,900
South East Alabama Consortium	Montgomery	Autauga, Bullock, Butler, Chilton, Elmore, Lee, Macon, Montgomery, Russell, Barbour, Coffee, Crenshaw, Dale, Geneva, Henry, Houston, Pike, Lowndes, and Covington Counties	\$221,000
South West Alabama AIDS Consortium	Selma	Baldwin, Clarke, Choctaw, Conecuh, Dallas, Escambia, Hale, Marengo, Monroe, Perry, Sumter, Washington and Wilcox Counties	\$108,000
West Alabama HIV/AIDS Consortium	Tuscaloosa	Lamar, Pickens, Tuscaloosa, Green, Bibb, Fayette, and Walker Counties	\$63,750

Accomplishments

Clients Served (duplicated count), FY 1996:	2,800
Men:	71%
Women:	29%
<13 years old:	1%
13-19 years old:	2%
20+ years old:	96%

White:	40%
African American:	58%
Hispanic:	1%
Asian/Pacific Islander:	0%
Native American/Alaskan Native:	0%
Other, unknown or not reported:	1%

Men who have sex with men (MSM):	39%
Injecting drug user (IDU):	9%
Men who have sex with men and inject drugs (MSM/IDU):	4%
Heterosexual contact:	43%
Other, unknown or not reported:	5%

► **Improved Patient Access**

- Title II providers have reported large increases in the number of clients served over the past four years. The total aggregate number served in 1998 was 4,900 clients (the sum of unduplicated counts from each provider), a 206% increase compared with 1995. At the same time, the amount of primary medical care provided increased by 287% and mental health services by 105%. The number of health care clients increased from 900 in 1995 to 1,920 in 1998 (+113%); medical care visits increased from 2,813 in 1995 to 10,879 in 1998 (+287%); mental health visits increased from 407 in 1995 to 836 in 1998 (+105%); and the number of home health clients decreased from 610 in 1995 to 412 in 1998 (-32%).
- During 1997, the number of satellite clinic locations and the number of operational clinic days in rural areas were expanded, in response to growing needs. Viral load testing services were added in April 1998, with 205 clients served by the end of the year.
- The ADAP formulary has expanded steadily since 1995 from seven to 13 in 1996, 18 in 1997, and 21 as of January 1999, including newly approved medications.

► **Improved Patient Outcomes**

- A comparison of historical ADAP data with more recent years shows changing patterns in client demographics. As of December 1998, the number of African Americans enrolled had increased to 53%, as compared to 50% in 1991-92. Women comprised 20% of enrolled clients in 1998, compared to 16% in 1991.

► **Cost Savings**

- The ADAP was reorganized and restructured in 1997 in response to the challenge of providing access to effective but costly combination antiretroviral therapies. This included establishing a centralized contract-pharmacy model to allow the ADAP to participate in the 340-B Drug Pricing Discount Program, resulting in reported savings of approximately 34%. In addition, the grantee increased the total budget for ADAP by 30% in 1997, by directing almost 60% of base Title II funds to ADAP along with the earmark, for a total of 72% of all Title II funds going to ADAP in that year. In 1998, 74% of all Title II funds were allocated to ADAP, and 77% for 1999.
- Despite these measures, in order to remain solvent and ensure continuity of treatment the ADAP also found it necessary to: 1) tighten eligibility by lowering it from 300% FPL to 250% FPL; 2) cap client enrollment; and 3) establish a waiting list. As a result, the total number of ADAP clients served in 1997 declined by 20% to 850 clients in 1996, down from 1,060 in 1995. In 1997, the number reported served increased by 7% to 911 clients, of whom 85% receive protease inhibitors and 95% have incomes at or below 200% FPL. [Note: although the client cap is set at 700, the total number served during the year is higher since some clients leave the program before the year is out (e.g., when they become eligible for Medicaid, move out of state, or in some cases if their income level increases) and thereby make room for others to become enrolled.]

► **Other Accomplishments**

- During the period from June through December 1997, the number of African Americans served increased to 61% of the total new clients as compared to 50% of the total in the first half of the year. The number of women applying to the program also increased from 16% of all clients since the program's inception to 24% of clients served since June 1997.

AIDS Drug Assistance Program (ADAP): Alabama

ADAPs provide medications to low-income PLWH with limited or no coverage from private insurance or Medicaid. ADAP is just one of multiple sources of public and private funding for HIV treatment, the largest source being Medicaid.

Funding History

Fiscal Year	1996	1997	1998	Total
Title II Funds	\$2,310,745	\$3,000,000	\$3,751,849	\$9,062,594
State Funds	\$0	\$150,000	\$184,000	\$334,000
Total	\$2,310,745	\$3,150,000	\$3,935,849	\$9,396,594

Program

- ▶ Administrative Agency: Dept. of Public Health
- ▶ Formulary: 18 drugs, 5 protease inhibitors, 8 other antiretroviral drugs.
- ▶ Medical Eligibility
 - ▶ HIV Infected: Yes
 - ▶ CD4 Count: Yes
- ▶ Financial Eligibility
 - ▶ Asset Limit: No
 - ▶ Annual Income Cap: No
- ▶ Co-payment: No
- ▶ PLWH involvement in advisory capacity:
- ▶ Enrollment cap: 700
- ▶ Waiting list as of 10/98: 200
- ▶ Waiting list for protease inhibitors as of 10/98: No

Clients Served

Clients enrolled, 10/98:	650
Number using ADAP each month:	450
Percent of clients on protease inhibitors:	85%
Percent of active clients below 200% FPL:	95%

Client Profile, FY 1996

Men:	84%
Women:	16%

<13 years old:	<1%
13-19 years old:	2%
20+ years old:	98%

White:	48%
African American:	50%
Hispanic:	<1%
Asian/Pacific Islander:	2%
Native American/Alaskan Native:	0%

Title III: Alabama

Title III provides funding to public and private nonprofit entities for outpatient early intervention and primary care services. From FY 1991 to FY 1998, \$445.8 million was appropriated for Title III programs in the U.S.

Funding History

Fiscal Year	1996	1997	1998	Total
Number of Programs Funded in State	5	5	6	
Total Title III funding in State	\$1,702,794	\$1,875,854	\$2,036,979	\$5,615,627

Clients Served in FY 1996 by Title III Grantees in State

(Based on programmatic information from 5 grantee(s) in State)

- ▶ Total number of people provided HIV pre-test counseling and testing services by State's Title III-funded programs: 10,993
- ▶ Total number of people provided primary health care services by State's Title III-funded programs: 1,621
- ▶ Number of new HIV-infected patients enrolled in State's Title III-funded early intervention programs in the past year: 500
- ▶ New clients (adults only) in State's Title III-funded early intervention programs presenting with CD4:
 - ▶ under 200: 46%
 - ▶ from 200 to 499: 33%
 - ▶ above 500: 21%
 - ▶ unknown: 1%

Accomplishments

Clients served (primary care only), 1996:	1,621
Men:	71%
Women:	29%
<13 years old:	0%
13-19 years old:	2%
20+ years old:	98%

White:	33%
African American:	66%
Hispanic:	1%
Asian/Pacific Islander:	0%
Native American/Alaskan Native:	0%
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Men who have sex with men (MSM):	40%
Injecting drug user (IDU):	9%
Men who have sex with men and inject drugs (MSM/IDU):	3%
Hemophilia/coagulation disorder:	1%
Heterosexual contact:	41%
Receipt of blood transfusion, blood components, or tissue:	1%
Other, unknown or not reported:	6%

► **Improved Patient Access**

- Since receiving CARE Act Title III funds, St. George's Clinic at Cooper Green Hospital has provided care to over 1,000 clients. Between 1994 and 1997, more than 525 new clients received medical care and social services. St. George's Clinic clients have made more than 1,614 contacts to mental health providers, outpatient substance abuse treatment programs, dental services, and nutritional services. Of the clients served, approximately 75% were uninsured, 76% African American, and 30% women. Additional medical providers, funded by the Title III program, have enabled St. George's Clinic to expand clinic hours of operation from one day per week to five days per week.
- The Franklin Primary Health Center, which first received Title III funding in 1991, more than doubled the total number of clients served by 1997. The Health Center, which serves the inner city and largely minority communities of East Mobile and the city of Prichard, has recently expanded into Loxley, a rural area located in Baldwin County.
- Through six different sites, the Family Oriented Primary Health Care Clinic serves as the largest provider of HIV early intervention care in Mobile County. In 1997, the grantee provided more than 1,950 visits to 363 clients. Of the clients served, 83% were at or below the Federal poverty level. Through the use of full-time Vietnamese interpreters, the clinic serves the Southeast Asian refugee community.

► **Improved Patient Outcomes**

- The adherence rates for new clients at St. George's Clinic increased from 20% in 1993 to 66% in 1997.
- Through the establishment of an on-site infectious disease clinic at the Franklin Primary Health Center, all pregnant HIV-infected women are informed about strategies to reduce perinatal HIV transmission.

► **Cost Savings**

- The expansion of the St. George's Clinic hours of operation has significantly decreased utilization of emergency room care.
- The additional social service staff supported by Title III funds at St. George's Clinic has enabled all clients to access HIV medications, regardless of the ability to pay. Since 1994, more than \$5 million in HIV medications have been secured through pharmaceutical companies at no cost to the clinic clients.

Title III Grantees, FY 1998

Grantee Name	Location	Service Area	Type of Organization
AIDS Service Center	Hobson City	15 Counties in East Central Alabama	Non-329/330/340 Health Center
Franklin Memorial Primary Health Center	Mobile	East Mobile, City of Prichard (Mobile Co.), Loxley (rural area of Baldwin Co.)	Community and Migrant (329/330) Health Center
Jefferson County Commission/ Cooper Green	Birmingham	Jefferson County	Health Department
Mobile County Health Department	Mobile	Mobile County	Health Department
Montgomery AIDS Outreach	Montgomery	24 counties	Non-329/330/340 Health Center

Planning Grants

1998 - Whatley Health Services - Tuscaloosa

Title IV: Alabama

Title IV provides funding for the development and operation of family-centered systems of primary health care and social services for infants, children, youth, women, and mothers (including pregnant women) and also serves high-risk individuals affected by HIV due to their relationship to family members with HIV. From FY 1991 to FY 1998, \$241.5 million was appropriated for Title IV programs in the U.S.

Funding History

Fiscal Year	1996	1997	1998	Total
Number of Funded Programs	1	1	1	
Total Title IV Funding	\$362,080	\$597,015	\$614,925	\$1,574,020

HIV-Infected and Affected Clients Served in 1996 by Title IV Grantees in State

Pregnant adolescents and women:	11%
Women with children:	15%
Adolescents/young adults:	6%
Children:	29%
Infants:	37%
Clients with AIDS/HIV Infection:	99%

Accomplishments

All clients served, 1996:	181
Men:	11%
Women:	89%
(Adolescents and adults only)	
<13 years old:	66%
13-19 years old:	6%
20+ years old:	28%

White:	14%
African American:	85%
Hispanic:	0%
Asian/Pacific Islander:	0%
Native American/Alaskan Native:	0%
Other, unknown or not reported:	1%

Men who have sex with men (MSM):	0%
Injecting drug user (IDU):	0%
Men who have sex with men and inject drugs (MSM/IDU):	0%
Hemophilia/coagulation disorder:	2%
Heterosexual contact, non IDU:	4%
Receipt of blood transfusion, blood components, or tissue:	0%
Pediatric Exposure:	65%
Other, unknown or not reported:	28%

► **Improved Patient Access**

- More than 90% of children with clinically recognized HIV infection receive medical care and support services through the University of Alabama's (UAB) Title IV project. Between 1995 and 1997, the total number of clients served by the Title IV program increased by 45%.
- The grantee established a satellite clinic based in Montgomery County to serve women and children from a broader geographic region as part of UAB's Title IV project.
- A pharmacist was added to UAB's project staff in 1996 to educate clients, assess compliance with treatment regimens, and assist clinical staff in monitoring adverse drug reactions.
- ZDV is offered to 100% of all HIV-infected, pregnant women enrolled in the Title IV program in an effort to reduce perinatal transmission. If determined to be of benefit to the mother, other antiretroviral medications are also offered.

► **Improved Patient Outcomes**

- Almost 70% of HIV-exposed infants are referred to the University of Alabama before the first month of age. Approximately 81% of children have their first appointment within 30 days.
- In order to assess the impact of care for pregnant women and perinatally exposed infants, information related to access to antiretroviral medications during pregnancy and perinatal transmission rates are being documented systematically through Alabama's Title IV project.

► **Cost Savings**

- In 1997, the total number of hospitalizations decreased by 19% from the previous year for all UAB Title IV enrolled clients. Of the 37 hospitalizations that occurred in 1997, births of newborns accounted for 14 admissions.

Title IV Grantees, FY 1998

Grantee Name	Location	Service Area	Type of Organization
University of Alabama, Birmingham	Birmingham	State of Alabama, Jefferson County, City of Birmingham	Academic Medical Center

Special Programs of National Significance (SPNS): Alabama

The goal of the SPNS program is to advance knowledge about the care and treatment of persons living with HIV/AIDS by providing time-limited grants to assess models for delivering health and support services. From FY 1991 to FY 1998, \$119.9 million in funding was dedicated for SPNS programs in the U.S.

Funding History

Fiscal Year	1996	1997	1998	Total
Number of programs funded	1	1	0	
Total SPNS Funding in State	\$37,850	\$34,400	\$0	\$72,250

Project Descriptions

► **University of Alabama, Birmingham**

Location: Birmingham

Project period: 10/93 - 9/96

Population Served: High-risk females (10-24 years old)

Description of Services: The TAP project provides focused HIV outreach, education, testing, counseling and case management for disadvantaged, high-risk females between the ages of 12 and 20. The TAP model improves client access to medical and psychosocial services through family-centered case management. Specific interventions entail: preventing transmission of HIV by reducing risk behavior; identifying young women with HIV earlier in the course of their illness through outreach and testing; and improving access to services through tracking, identification of acute needs, and referral for services.

Project Highlights

- The TAP project developed an expanded network of care through linkages to community agencies that serve high-risk young women.
- The project successfully introduced the TAP line, a project access line for HIV information, enrollment in risk-harm reduction groups, access to TAP staff, and access to testing.
- The project established the Adolescent Testing Center, a clinical center for age and culturally appropriate HIV counseling and testing services, risk assessment, and referrals. This service is also available through a local juvenile detention center.
- The project developed risk-harm reduction sessions specifically designed for young women.
- A total of 92 disadvantaged, high-risk, and previously unidentified young females have been formally enrolled and have accessed program services. Approximately 70 are in follow-up care.

- TAP devised a system for tracking participants' use of services, including mail reminders and phone contacts to ensure continued attendance and participation.
- TAP also developed a curriculum to address issues of adolescent males in response to inquiries and requests by young men, some of whom were in a relationship with the participants.

AIDS Education and Training Centers: Alabama

The AETCs are a network of 15 regional education centers (75 local performance sites covering all 50 states, Washington, D.C., Puerto Rico, and the Virgin Islands) funded by the CARE Act to train clinical health care providers, provide consultation and technical assistance and disseminate rapidly changing information for the effective management of HIV infection. Targeted providers are CARE Act-funded programs, federally funded community migrant health centers, and clinicians serving persons living with HIV infection. From FY 1991 to FY 1998, \$171 million was appropriated for AETC programs in the U.S.

- ▶ Southeast AETC
- ▶ States Served: Alabama, Georgia, North Carolina, South Carolina
- ▶ Primary Grantee: Emory University, School of Medicine, Atlanta, GA
- ▶ Subcontractors in State: Employee Education System/TAHEC, Inc. - Tuskegee

Funding History

Year	1996	1997	1998	Total
Total AETC Funding for State	\$5,550	\$30,750	\$25,750	\$62,050

Training Highlights from FY 1997

- From July 1997 to June 1998, the AETC offered 84 events to the staff at CARE Act-funded agencies. For example, the AETC developed and managed the first residency experience for Emory University's Family and Preventive Medicine Department on ambulatory management of adult HIV patients. Ten residents received an average of 24 hours of instruction including four hours on patient education and four hours on dental care. The North Carolina performance site collaborated with a SPNS program in the State to provide four hours of training to 23 physicians, midlevel clinicians, mental health providers, hospital workers, and health department workers on the medical management of HIV, with an emphasis on the use of consulting physicians. The performance site at Clark University in Atlanta conducted a semester-long course (42 hours) for graduate students in the University's School of Social Work. The South Carolina performance site and the University of South Carolina School of Medicine collaborated to train nurse practitioners and physicians on the medical management of HIV-infected children. The Alabama performance site provided a course titled "STD/HIV Prevention Through Behavior Modification" two times. The 9.5-hour course was attended by 44 care providers.
- The AETC developed and mailed a resource kit on prenatal HIV testing to 7,789 OB/GYN and family practice physicians and 471 certified nurse-midwives in the region. The kit contained a waiting room poster to encourage prenatal HIV testing and a booklet with consent forms, counseling checklists, and other material to enhance HIV counseling of prenatal patients.

- The South Carolina performance site offered a six-hour training for 22 care providers from health care clinics, drug treatment programs, AIDS service organizations, and minority outreach programs. The goal of the training was to educate participants about appropriate evaluation methodologies for assessing HIV prevention programs.
- The North Carolina performance site offered a seven-hour training to 67 clinical care providers, counselors, case managers, and social workers designed to help participants identify elements of cross-cultural healing, beliefs about illness and disease, cultural world views, and their implications for delivering effective and compassionate care to persons with HIV.

HIV/AIDS Dental Reimbursement Program: Alabama

The CARE Act HIV/AIDS Dental Reimbursement Program reimburses eligible dental schools and postdoctoral dental education programs for the reported, uncompensated costs of providing oral health care to PLWH. From FY 1996 (when the program was first funded by the CARE Act) to FY 1998, \$22.2 million in funding was provided for programs in the U.S.

Funding History

Year	1996	1997	1998	Total
Number of Programs Funded in State	1	1	1	
Total HIV/AIDS Dental Reimbursement Program Funding in State	\$14,442	\$27,101	\$23,769	\$65,312

Accomplishments

Est. clients served, 1996:	287
Men:	81%
Women:	19%
<13 years old:	0%
13-19 years old:	1%
20+ years old:	99%

HIV/AIDS Dental Reimbursement Program Grantees, FY 1998

Grantee Name	Location
University of Alabama, School of Dentistry	Birmingham